

CERTIFICATE OF BIRTH
STATE OF SOUTH CAROLINA.
Bureau of Vital Statistics
State Board of Health

File No.—For State Registrar Only

71147

(1) PLACE OF BIRTH

County of AikenTownship of Langleyor
Inc. Town ofor
City of(No. St.; Ward)
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)Registration District No. V. 17. a Registered No. 45
(For use of Local Registrar)(2) Full Name of Child. Fyer Cobb Davis. } If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? <u>Boy</u>	(4) Twin or Triplet? <u>+</u> <small>To be answered only in event of Twins or Triplets</small>	(5) Number in order of birth	(6) Are Parents Married? <u>yes</u>	(7) DATE OF BIRTH <u>Aug 9, 1916</u> <small>(Name of Month) (Day) (Year)</small>
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FATHER.

(8) FULL NAME Jim Davis(9) PRESENT POSTOFFICE OF FATHER Langley S.C.(10) COLOR OR RACE colored (11) AGE AT LAST BIRTHDAY 39 (Years)(12) BIRTHPLACE Aiken Co. S.C.(13) OCCUPATION Farmer(20) Number of children born to mother, including present birth 5

MOTHER.

(14) NAME BEFORE MARRIAGE Victoria James(15) PRESENT POSTOFFICE OF MOTHER Langley S.C.(16) COLOR OR RACE colored (17) AGE AT LAST BIRTHDAY 33 (Years)(18) BIRTHPLACE Aiken Co. S.C.(19) OCCUPATION Housewife(21) Number of children of this mother now living, including present birth 5

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive, at 7 A.M.,
(Born alive or stillborn) (Hour A. M. or P. M.)
on the date above stated.(23) (Signature) Martha ^{Her} Johnson M.D.(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Langley S.C.

Given name added from a supplemental report

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F. H. Dowdy Registrar(26) Witness E. W. Spradley

(Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed Aug 17, 1916 (28) F. H. Dowdy Local Registrar.

*When there was no attending physician or midwife, then the father, householder, etc., should make this return. If a child breathes even once, it must not be reported as stillborn. No report is desired of stillbirths before the fifth month of pregnancy.

MARGIN RESERVED FOR FINDING.
 VALUE PLAINLY WITH WRITING IN THIS IS A FARMER'S RECORD.
 N. B. IN CASE OF TWINS OR TRIPLETS MAKE SEPARATE BLANKS FOR EACH CHILD, AND MARK THE FIRST-BORN. No. 1. THE OTHER, No. 2, etc., in question 5.
 McCaw of Columbia